L22000533324

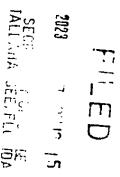
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COVER LETTER

Division of Corporations Metabolizing Freedom L.L.C. SUBJECT: _ Name of Limited Liability Company The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Brittney Aguiar Name of Person Metabolizing Freedom L.L.C. Firm/Company 12825 sw 6 st Address Miami, FL 33184 City/State and Zip Code Brittney.aguiar09@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Name of Person Daytime Telephone Number Enclosed is a check for the following amount: □ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee, **■** \$25.00 Filing Fee ☐ \$30.00 Filing Fee & Certificate of Status & Certificate of Status Certified Copy Certified Copy (additional copy is enclosed) (additional copy is enclosed)

Mailing Address:

TO:

Registration Section

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address:

Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Metabolizing Freedom L.L.C.				
(<u>Name of the Limited Liability Com</u> (A Florida Limited	pany as it now appears I Liability Company)	on our records.)		
The Articles of Organization for this Limited Liability Compan L22000533324	y were filed on	12/21/2022	and assigned	
his amendment is submitted to amend the following:				
A. If amending name, <u>enter the new name of the limited lia</u>	bility company her	<u>e</u> :		
he new name must be distinguishable and contain the words "Limited Lial	bility Company," the des	ignation "LLC" or th	ne abbreviati	on "L.L.C."
Enter new principal offices address, if applicable:			_ <u>₹</u> .	<u> </u>
Principal office address MUST BE A STREET ADDRESS)			- 1-1-1	~~~
			<u> </u>	
			CO CO CO CO	- 1
Enter new mailing address, if applicable:				-
Mailing address MAY BE A POST OFFICE BOX)				
		<u> </u>	<u>;-</u>	<u>., </u>
3. If amending the registered agent and/or registered office gent and/or the new registered office address here: Name of New Registered Agent:	address on our rec	ords, <u>enter the r</u>	name of th	e new regist
New Registered Office Address:	Enter Florid	a street address		
	7.me7 1 (071G			
	i.mer i jorid	, Florida	l	

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Brittney Aguiar	12825 sw 6 st	
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		Miami, FL 33184	[]D.,
			□Remove
			□Change
AMBR	Brittney Aguiar	12825 sw 6 st	-
			🗆 🗀 Add
		Miami, FL 33184	
			■Remove
			□Change
			Contange
			□Add
			SECTOR CONTROL OF THE PROPERTY
			= □Remove
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